## **DECLARATION AND POWER OF ATTORNEY**

As a below-named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and joint inventor of the subject matter, which is claimed and for which a patent is sought on the invention entitled: A SYSTEM AND METHOD FOR DEVELOPING USER INTERFACES PURELY BY MODELING AS META DATA IN SOFTWARE APPLICATION

the specificat	ion of which:				
X is attached	hereto.				
was filed o	onas Application :	Serial No and	was amended on _	(if applicable)	
	that I have reviewed a g the claims, as amend				
	e the duty to disclose le oplication in accordance				
foreign application(s)	n foreign priority benefit for patent or inventor's patent or Inventor's ce aimed:	certificate listed belo	w and have also ide	entified below any	
	Prior F	oreign Application(s)			
Priority Claimed					
Number	Country	Filing Date	Yes	<u>No</u>	
<del> </del>				_	
Application(s) listed b not disclosed in the pr Title 35, United States defined in Title 37, Co	n the benefit under Title elow and insofar as the rior United States appli is Code, Section 11. I a ode of Federal Regulati n and the national or PC	e subject matter of ea cation in the manner cknowledge the duty ons, Sections 1.56 w	ch of the claims of t provided by the first to disclose material hich occurred betwe	his application is paragraph of information as een the filing date	
Application S	Application Serial No. Filing Date		<u>Status</u>		
60/435559	) Decen	December 20, 2002		PENDING	

And I hereby appoint: William L. Botjer; Reg. No.27, 990; PO Box 478, Center Morlches NY 11934 my attorney with full power of substitution and revocation, to prosecute this application, to make alterations and amendments therein, to receive the patent, to transact all business in the Patent and Trademark Office connected therewith and to file any International Applications which are based th reon under the provisions of the Patent Cooperation Treaty.

## DOCKET NO. RAG- 005

Please address all communications, and direct all telephone calls, regarding this application to: William L. Botjer; Reg. N .27, 990; PO B x 478, Center M riches NY 11934, (212) 737-5728 r (631) 874-4826.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and b li f are believed to b tru; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.

1) Full name of Inventor: DR. VENKATESAN SRINIVASAN Inventor's signature: Citizenship: USA Residence: MASSACHUSETTS, USA Post Office Address: 11 CUTTERS BLUFF, WESTON, MA 02493, USA 2) Full name of Inventor: MAHANTESH KOTHIWALE Inventor's signature: Citizenship: INDIA Residence: MASSACHUSETTS, USA Post Office Address: 70 York Road, Mansfield, MA 02048, USA 3) Full name of Inventor: RUMMANA ALAM Date: 12/17/03 Inventor's signature: Citizenship: INDIA Residence: MASSACHUSETTS, USA Post Office Address: 40 CHRISTINA DRIVE, WALPOLE, MA 02081, USA 4) Full name of Inventor: SRINIVASAN BHARADWAJ

Inventor's signature:

Citizenship: INDIA

Residence: MASSACHUSETTS, USA

Post Office Address: 7 8AW MILL POND ROAD, SHARON, MA 02067, USA